



CHECK LIST

Make sure you upload or send ALL materials according to the instructions here and online and keep a copy of documents for your records. If you do not possess a current P-RDT, please also complete and submit Application Part A.

It is recommended that items sent via postal mail are sent via registered mail or other method with tracking.

YOUR APPLICATION WILL NOT BE FORWARDED TO THE REGISTRY COMMITTEE IF IT IS NOT COMPLETE!

An incomplete application will be returned to you for correction and submission in the next round.

Please upload the following documents and mail transcripts to the NADTA office (note that documents requiring signatures will need to be printed, signed, and uploaded).

Registry Application

- _____ Documentation of completion of additional clinical training in drama therapy and/or psychotherapy, if applicable, (if not on an enclosed transcript).
- _____ A short essay (1-2 pages) on your drama therapy orientation with brief details about your workplace (population, type(s) or services offered by workplace).

Payments:

- _____ \$100 (\$50 if you possess an P-RDT) non-refundable application fee which can be paid online at: <https://nadta.memberclicks.net/rdt-application#/>
- _____ Applicants are required to be an active member of NADTA for the duration of their ARDT or 12 months immediately preceding the RDT application.

The following need to be sent by the people who have written them:

- _____ A letter of recommendation from a supervisor **emailed from the supervisor** to: office@nadta.org **or sent via postal mail in a sealed, signed envelope**. The writer's signature is required OVER the seal of the envelope.
- _____ A letter of recommendation from the director of your training program or (if alternative training) your Board Certified Trainer in **emailed from the director or BCT** to: office@nadta.org **or sent via postal mail in a sealed, signed envelope**. The writer's signature is required OVER the seal of the envelope.
- _____ A letter of recommendation from another trainer, supervisor, or colleague, who can speak to your drama therapy work **emailed** to: office@nadta.org **or sent via postal mail in a sealed, signed envelope**. The writer's signature is required OVER the seal of the envelope.

APPLICATION PART B

Registered Drama Therapist (RDT)

NAME – (Please list your name as you would like it printed on your Registry Certificate)			DATE OF BIRTH
LIST ANY ADDITIONAL NAMES THAT MAY BE ON YOUR APPLICATION MATERIALS OR ACADEMIC RECORDS			
HOME ADDRESS			HOME PHONE
CITY	STATE	ZIP	EMAIL
COMPANY			WORK PHONE
WORK ADDRESS			FAX
CITY	STATE	ZIP	EMAIL

REGISTRATION PROCEDURAL BRIEF

I. Drama Therapy Internship(s): A minimum 300 direct client contact hours plus at least 30 hours of supervision plus additional indirect service hours to total 800 hours (See additional requirements listed inside application).

II. BASIC ELIGIBILITY REQUIREMENTS:

- 1000 hours of paid experience as a drama therapist at least one year after completion of master's degree. (See additional requirements listed inside)
- One (1) page in-depth description of your work. (This is the essay mentioned on the previous page)
- Membership in NADTA for at least one year prior to application (proof required).

III. ADDITIONAL TRAINING/WORK EXPERIENCE: (A minimum of 500 hours from one or any combination of the following):

- Additional Drama Therapy Internship (beyond the required 800 hours).
- Additional Work Experience (This may be at the same place you did your 1,000 hours).
- Additional Clinical Training
- Up to 100 hours of personal psychotherapy within the last 5 years (documented with letter from therapist on letterhead).
- All descriptions and documentation of completed training.

IV. ADDITIONAL INFORMATION

- Include one (1) copy each of three (3) letters of recommendation **in sealed envelope with writer's signature on seal.**
- Signed standards and ethics form
- \$50.00 non-refundable application fee in U.S. currency. Make payable to **NADTA.**

ACKNOWLEDGEMENT

I hereby affirm that all information in this application is accurate.

SIGNATURE

DATE

APPLICATION PART B

Registered Drama Therapist (RDT)

SECTION 1: INTERNSHIP REQUIREMENTS

REQUIRED

Drama Therapy Internship

Drama therapy internship must be a minimum of 800 hours. These hours include direct client contact hours, supervision hours, and indirect services such as preparing for sessions, writing notes, reviewing professional materials, and required meetings. The internship must take place in an accredited institution or licensed agency. You must have worked with at least two (2) different populations (e.g., emotionally disturbed, physically disabled, adolescent, elderly). Your internship may take place in one or more settings, but two (2)

population exposures are required as a minimum. Internship hours may not precede introductory drama therapy course work for alternative training students as well as students in M.A. approved programs. To receive your RDT, at least 300 hours of the internship must be direct client contact with at least 30 hours of supervision by a registered drama therapist, registered creative arts therapist or Master's level credentialed mental health or Education professional. "Direct client contact" is defined as the following: group therapy,

couples/family therapy, individual therapy, direct assessment, programming, outreach, formal consultation to other professionals or organizations, and milieu therapy. Because drama therapy requires more than adequate knowledge of group psychotherapy, a maximum of half of the hours of the direct client contact time (150 hours) can be counted for individual therapy. Playback Theater can count toward hours if approved by your school or your BCT.

If you have completed (2) two or more internships, please make additional copies of this page and fill out a separate form for each internship.

AGENCY/INSTITUTION

ADDRESS

CITY	STATE	ZIP
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SUPERVISOR'S NAME	DEGREE/CREDENTIAL
-------------------	-------------------

ADDRESS

CITY	STATE	ZIP
------	-------	-----

PHONE	FAX	EMAIL
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INTERNSHIP HOURS SUMMARY

DATE BEGAN	DATE ENDED
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NATURE OF SERVICE	POPULATION(S)
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Detail of Direct Client Service Hours

HOURS

1. Group Drama Therapy (Can include participation in, co-leadership, or leadership of drama therapy, creative arts therapy groups, psychodynamic, psycho-educational or community groups using action techniques, or milieu-centered activities like trips, special events, rehearsals, etc.)

2. Couples/Family Drama Therapy

3. Individual Drama Therapy

TOTAL DIRECT SERVICE HOURS

TOTAL INDIRECT SERVICES HOURS

TOTAL SUPERVISION HOURS

(Should be in a ratio of 1 supervision hour to every 10 direct client contact hours by a registered drama therapist, registered creative arts therapist, or Master's level credentialed mental health or education professional.)

GRAND TOTAL HOURS

APPLICATION PART B

Registered Drama Therapist (RDT)

SECTION 2: BASIC ELIGIBILITY REQUIREMENTS

PROFESSIONAL EXPERIENCE AS A DRAMA THERAPIST: 1000 hours of professional* experience as a drama therapist is required in order to become a Registered Drama Therapist. You may start to accrue these 1000 hours before you graduate from your M.A. program in drama therapy, or before you complete all of the requirements of Alternative Training if you have completed all of your core coursework and your internship is complete. But you MUST wait one year after your M.A. degree is completed to apply for your RDT. (If you graduated in May or June the year before you can apply for registry for the next year's March 15th deadline.)

In order to accrue hours pre-M.A. completion, students in M.A. drama therapy programs must complete all course work and internship, and be in the process of writing the thesis. For alternative training students who are concurrently working on a Master's degree along with Alternative Training, you must follow the above guidelines listed for M.A. drama therapy program students. If you already had your M.A. before beginning alternative training, in order to accrue paid experience hours, you must have completed your core course work for drama therapy as well as your internship.

Professional experience must be supervised by a Registered Drama Therapist, credentialed creative arts therapist or a credentialed master's-level mental health or special education professional. You must have one hour of supervision for every 10 hours of client contact time. We expect that at least 50% of your 1000 hours will be direct client contact hours (see internship section for definition of "direct client contact").

*Note: If you have acquired experience in a position that was unpaid, please attach a letter from a representative of the agency to document that:

- 1) explains that the position was recognized by the agency as professional and
- 2) provides a brief narrative justification for non-paid status.

(If you have more than one (1) work site, please copy this page and fill out a separate form for each site.)

Use of hours from Playback Theater: Participation in a playback troupe can be used towards the 1000 hours provided the drama therapist is facilitating clients in learning or performing playback.

AGENCY / INSTITUTION			PHONE
ADDRESS			FAX
CITY	STATE	ZIP	EMAIL
DATES OF PAID EXPERIENCE		TOTAL INDIRECT CLIENT HOURS	TOTAL SUPERVISION HOURS (1 hour supervision per 10 hours of client contact)
MONTH	MONTH		
YEAR	YEAR	TOTAL DIRECT CLIENT HOURS	TOTAL WORK HOURS (Only 40 hours per week may be counted.)
TO			
SUPERVISOR NAME & DEGREE/CREDENTIAL			PHONE
ADDRESS			FAX
CITY	STATE	ZIP	EMAIL

NATURE OF SERVICE PROVIDED BY AGENCY/INSTITUTION	POPULATION (S) SERVED

REQUIRED: On a separate page, attach a brief essay (1-2 pages) of the following*:
 In order to help the committee understand your particular drama therapy orientation, please write a one-two page essay describing your employment as a drama therapist in terms of your theoretical model(s) and intervention strategies. Describe your work in relation to the following NADTA definition: Drama therapy is the intentional use of drama/theater processes to achieve the therapeutic goal of symptom relief, emotional and physical integration, and personal growth. Let us know what you do, with whom and why. Please be specific.
 * You do not have to write an essay for each job – just ONE ESSAY!

SUPERVISOR ACKNOWLEDGEMENT

I verify that the hours and supervision hours stated above are accurate.

 SUPERVISOR SIGNATURE

 DATE

APPLICATION PART B

Registered Drama Therapist (RDT)

SECTION 3: ADDITIONAL TRAINING / WORK EXPERIENCE

A minimum total of 500 hours is required from one (1) or more options.

ADDITIONAL DRAMA THERAPY INTERNSHIP

You may include hours of any on-site internship beyond the 800 hours included under Basic Eligibility Requirements. For every ten (10) hours of client contact time, one (1) additional hour of supervision is required by a registered drama therapist, masters-level registered creative arts therapist, or licensed mental health or education professional.

(If you have completed two (2) different internship sites, please, copy this page and fill out a separate form for each site.)

NAME OF AGENCY / INSTITUTION

ADDRESS

CITY

STATE

ZIP

SUPERVISOR NAME & DEGREE/CREDENTIAL

PHONE

ADDRESS

FAX

CITY

STATE

ZIP

EMAIL

NATURE OF SERVICE PROVIDED BY AGENCY/INSTITUTION

POPULATION (S) SERVED

INTERNSHIP HOURS SUMMARY

(Do not include any internship hours listed in Section 1: Educational Requirements)

DATE BEGAN

DATE ENDED

Detail of Direct Client Service Hours	HOURS
1. Group Drama Therapy (Can include all participation in co-leadership or leadership of drama therapy, creative arts therapy groups, psychodynamic, psycho educational or community groups, or milieu-centered activities such as trips, special events, rehearsals, etc.)	
2. Couples/Family Drama Therapy	
3. Individual Drama Therapy	
TOTAL DIRECT SERVICE HOURS	
TOTAL INDIRECT SERVICES HOURS	
TOTAL SUPERVISION HOURS (Should be a ratio of 1 supervision hour to every 10 direct client contact hours by a registered drama therapist, registered creative arts therapist, or Master's level credentialed mental health or education professional.)	
GRAND TOTAL HOURS	

APPLICATION PART B

Registered Drama Therapist (RDT)

SECTION 3: ADDITIONAL TRAINING / WORK EXPERIENCE - CONTINUED

ADDITIONAL CLINICAL TRAINING

Where additional training in drama therapy or fields related to drama therapy has occurred, a range of training programs may be credited towards additional hours (post-graduate work, workshops, conferences, practicum, institute or apprenticeship training). Programs may be oriented toward individual, group, and/or family therapy with any population. Supervision must have been provided by a licensed mental health professional or registered creative arts therapist with a minimum of a Master's degree.

NADTA supports its members to maintain good mental health and insight into their own issues. Therefore, we will also accept up to 100 hours of personal psychotherapy that has occurred within the last five years for additional clinical training credit. In order to document these hours, please include a signed letter from the psychotherapist on letterhead briefly noting that you have attended the stated hours of psychotherapy, and the dates that it has occurred. No additional personal information is to be included in that letter.

Participation in a playback troupe can be counted toward the 500 hours as long as it was supervised by an RDT.

(If you have completed two (2) or more trainings, please copy this page and fill out a separate form for each.)

TYPE OF TRAINING					
NAME OF AGENCY / INSTITUTION				PHONE	
ADDRESS				FAX	
CITY		STATE	ZIP	EMAIL	
DATES OF TRAINING		TOTAL HOURS CLAIMED AT THIS SITE		POPULATION(S) SERVED (IF APPLICABLE)	
MONTH	TO	MONTH			
YEAR		YEAR	HOURS PER WEEK	WEEKS PER YEAR	
SUPERVISOR NAME & DEGREE/CREDENTIAL				PHONE	
ADDRESS				FAX	
CITY		STATE	ZIP	EMAIL	
WORKED PERFORMED AND/OR TRAINING RECEIVED			NATURE OF SERVICE PROVIDED BY AGENCY/INSTITUTION		

Attach necessary documentation for training (for example, certificate of completion or letter describing training).

APPLICATION PART B

Registered Drama Therapist (RDT)

SECTION 3: ADDITIONAL TRAINING / WORK EXPERIENCE - CONTINUED

ADDITIONAL WORK EXPERIENCE

Hours of paid work experience beyond the 1000 hours in the basic Eligibility Requirements may be included. Supervision must be provided by a registered drama therapist or other credentialed Master's level mental health or education professional.

(If you have more than one (1) work site, please copy this page and fill out a separate form for each site.)

NAME OF AGENCY / INSTITUTION			PHONE		
ADDRESS			FAX		
CITY	STATE	ZIP	EMAIL		
DATES OF PAID EXPERIENCE		TOTAL INDIRECT HOURS	TOTAL SUPERVISION HOURS (1 hour supervision per 10 hours client contact)		
MONTH	TO				
YEAR	YEAR	TOTAL DIRECT CLIENT HOURS	TOTAL HOURS		
NATURE OF SERVICE PROVIDED BY THE AGENCY / INSTITUTION			TYPE OF CLIENT(S) SERVED		
SUPERVISOR NAME & DEGREE/CREDENTIAL			PHONE		
ADDRESS			FAX		
CITY	STATE	ZIP	EMAIL		
SUPERVISOR ACKNOWLEDGEMENT					
I verify that the hours and supervision hours stated above are accurate.					
_____ SUPERVISOR SIGNATURE			_____ DATE		

SECTION 4: ADDITIONAL INFORMATION

LETTERS OF RECOMMENDATION:

Include the letters in your application with the writer's signature over the seal of the envelope.

Three letters of recommendation are required for the RDT process. It is your responsibility to gather the letters from individuals with the qualifications listed below. Include the letters in your application with the writer's signature over the seal of the envelope.

- Recommendation #1:** A supervisor who has overseen the applicant's work hours as a drama therapist.
- Recommendation #2:** An individual who has been affiliated with the applicant's education or training. For graduates of an NADTA approved drama therapy program, this must be the program director. For alternative training students, this letter must be from the primary BCT/Mentor.
- Recommendation #3:** A drama therapy, creative arts therapist, or licensed mental health colleague or supervisor who is familiar with the extent and quality of the applicant's work.

YOUR APPLICATION IS NOT COMPLETE UNTIL ALL PARTS OF THE APPLICATION ARE IN THE OFFICE.

ALL APPLICATIONS MUST BE COMPLETED AND IN THE NADTA OFFICE BY MARCH 15 AND AUGUST 15 EACH YEAR.

APPLICATION PART B

Registered Drama Therapist (RDT)

WORKSHEET

Please include this worksheet with your application

I. EDUCATION REQUIREMENTS

INTERNSHIP

	HOURS
Direct Client Contact Hours <small>(Must be at least 300 clock hours)</small>	
Supervision Hours <small>(Must be at least 30 clock hours)</small>	
Indirect Hours <small>(Maximum 470 clock hours)</small>	
Total Internship Hours (800 hours)	

II. BASIC ELIGIBILITY REQUIREMENTS

	HOURS
Total Drama /Theater Experience, or Total Drama / Theater Training Hours <small>(Must be at least 500 clock hours total)</small>	
Total Professional Experience as a Drama Therapist <small>(Must be 1000 clock hours total)</small>	

III. ADDITIONAL TRAINING / WORK EXPERIENCE

**Total of all four (4)
must equal 500 hours**

Any or all items listed below:

	HOURS
Additional Drama Therapy Internship Hours <small>(Do not include any internship hours listed in Section 1: Educational Requirements)</small>	
Additional Clinical Training Hours	
Up to 100 hours of Personal Psychotherapy**	
Additional Work Experience Hours	
TOTAL ADDITIONAL WORK/TRAINING EXPERIENCE	

** This can be documented by a letter from the therapist stating the number of hours you spent in psychotherapy with him/her.

Disclaimer

It is important to note that to become a Registered Drama Therapist does not automatically mean that you can become licensed as a drama therapist or psychotherapist in the state in which you live. It is your responsibility to check on your state licensing regulations, including preferred master degrees, required course work and internship hours. NADTA works to track therapy legislation requirements, as well as to protect drama therapists in pending licensing issues. Unfortunately, licensing varies state to state, and each state's psychotherapy and counseling laws follows different regulations. At this time, there is no state licensing available in the United States for the title "Drama Therapist." To find out more information about the state licensing, please contact the Government Affairs Chair of the NADTA Board of Directors at the NADTA office, or your individual state mental health licensing board.

APPLICATION PART B

Registered Drama Therapist (RDT)

North American Drama Therapy Association
 1450 Western Avenue Suite 101
 Albany, NY 12203

Phone: 571.333.2991
 Fax: 518.463.8656
 Email: office@nadta.org

RDT RECOMMENDATION FORM

Part One

The applicant listed below has applied to the North American Drama Therapy Association for registration as a drama therapist. You have been identified as a reference. To help us understand the nature of the

applicant's training and job responsibilities, please respond, as fully as you can, to the following questions. Please be sure the information is legible: typewritten responses are preferred.

This letter of recommendation can be submitted by:

Sending as an email attachment to office@nadta.org

OR

Place the completed, signed, dated reference in an envelope and seal it with your signature written over the seal and mail to the NADTA at the address listed above.

RDT application deadlines are March 15 and August 15 of each year.

Thank you!

The NADTA Registry Committee

TO BE COMPLETED BY APPLICANT

APPLICANT'S NAME			
ADDRESS			
CITY	STATE	COUNTRY	ZIPCODE
HOME PHONE	FAX	EMAIL	
PERIOD OF TRAINING / WORK WITH APPLICANT			

TO BE COMPLETED BY REFERENCE

REFERENCE' NAME AND CREDENTIALS			TITLE
AGENCY / SCHOOL / INSTITUTE			
ADDRESS			
CITY	STATE	COUNTRY	ZIPCODE
WORK PHONE	FAX	EMAIL	
PERIOD OF TRAINING / WORK WITH APPLICANT			

APPLICATION PART B
Registered Drama Therapist (RDT)

RDT RECOMMENDATION FORM
Part Two

1. Please describe as completely as possible the nature of the training/work completed by the applicant with you:

2. Please comment on the applicant's competencies in the area of drama therapy, including strengths, weaknesses, and evidence of theoretical orientation as it informs clinical judgment, ability to communicate with other staff and ability to perform duties assigned to him/her.

3. Do you recommend this applicant for RDT status? Yes No With reservations (please specify)

Signature (not needed if email from professional email account)

Date

Printed Name

APPLICATION PART B

Registered Drama Therapist (RDT)

North American Drama Therapy Association
 1450 Western Avenue Suite 101
 Albany, NY 12203

Phone: 571.333.2991
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APPLICANT'S NAME			
ADDRESS			
CITY	STATE	COUNTRY	ZIPCODE
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PERIOD OF TRAINING / WORK WITH APPLICANT			

TO BE COMPLETED BY REFERENCE

REFERENCE' NAME AND CREDENTIALS			TITLE
AGENCY / SCHOOL / INSTITUTE			
ADDRESS			
CITY	STATE	COUNTRY	ZIPCODE
WORK PHONE	FAX	EMAIL	
PERIOD OF TRAINING / WORK WITH APPLICANT			

APPLICATION PART B
Registered Drama Therapist (RDT)

North American Drama Therapy Association
1450 Western Avenue Suite 101
Albany, NY 12203

Phone: 571.333.2991
Fax: 518.463.8656
Email: office@nadta.org

RDT RECOMMENDATION FORM
Part Two

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Signature (not needed if email from professional email account)

Date

Printed Name

APPLICATION PART B

Registered Drama Therapist (RDT)

North American Drama Therapy Association
 1450 Western Avenue Suite 101
 Albany, NY 12203

Phone: 571.333.2991
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RDT RECOMMENDATION FORM

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TO BE COMPLETED BY APPLICANT

APPLICANT'S NAME			
ADDRESS			
CITY	STATE	COUNTRY	ZIPCODE
HOME PHONE	FAX	EMAIL	
PERIOD OF TRAINING / WORK WITH APPLICANT			

TO BE COMPLETED BY REFERENCE

REFERENCE' NAME AND CREDENTIALS			TITLE
AGENCY / SCHOOL / INSTITUTE			
ADDRESS			
CITY	STATE	COUNTRY	ZIPCODE
WORK PHONE	FAX	EMAIL	
PERIOD OF TRAINING / WORK WITH APPLICANT			

